#### Case 15-40857 Doc 1 Filed 12/01/15 Entered 12/01/15 10:14:05 Desc Main Document Page 1 of 56

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

B 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Valerie First name  L	First name
	Bring your picture identification to your meeting with the trustee.	Middle name  Dozier  Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-3320	

Case 15-40857 Doc 1 Filed 12/01/15 Entered 12/01/15 10:14:05 Desc Main Document Page 2 of 56

Case number (if known)

Debtor 1 Valerie L Dozier

		Abo	ut Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	<b>=</b> 11	nave not used any business name or EINs.		$\square$ I have not used any business name or EINs.
	Include trade names and doing business as names	Busi	ness name(s)	I	Business name(s)
		EINs			EINs
5.	Where you live			1	If Debtor 2 lives at a different address:
		Chic	9 S. St. Louis Apt. 2B cago, IL 60623		
			ber, Street, City, State & ZIP Code	Ī	Number, Street, City, State & ZIP Code
		Cour	<u> </u>	-	County
		abov	ur mailing address is different from the one re, fill it in here. Note that the court will send any es to you at this mailing address.	i	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Num	ber, P.O. Box, Street, City, State & ZIP Code	<u>-</u> 	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Chec	ck one:		Check one:
	bankruptcy		Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
			I have another reason. Explain. (See 28 U.S.C. § 1408.)		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

Case 15-40857 Doc 1 Filed 12/01/15 Entered 12/01/15 10:14:05 Desc Main Document Page 3 of 56

Case number (if known) Debtor 1 Valerie L Dozier

ar	t 2: Tell the Court About	Your Bar	kruptcy C	ase				
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.						
	choosing to file under	Chapter 7						
		☐ Cha	pter 11					
		☐ Cha	pter 12					
		☐ Cha	pter 13					
3.	How you will pay the fee	a o	bout how yo	ou may pay. Typ attorney is sub	pically, if you are paying the fee yo	with the clerk's office in your local court for more details urself, you may pay with cash, cashier's check, or money alf, your attorney may pay with a credit card or check with		
				pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay of Fee in Installments (Official Form 103A).				
		b	ut is not red	uired to, waive	your fee, and may do so only if you	only if you are filing for Chapter 7. By law, a judge may, ur income is less than 150% of the official poverty line see in installments). If you choose this option, you must fill		
		0	ut the <i>Appli</i>	cation to Have t	the Chapter 7 Filing Fee Waived (C	Official Form 103B) and file it with your petition.		
).	Have you filed for bankruptcy within the last 8 years?	■ No.						
	iasi o years:	<b>□</b> 165.	District		When	Case number		
			District		When	Case number		
			District		When	Case number		
10.	Are any bankruptcy cases pending or being	■ No						
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.						
			Debtor			Relationship to you		
			District		When	Case number, if known		
			Debtor			Relationship to you		
			District		When	Case number, if known		
  1.	Do you rent your	■ No.	Go to	line 12.				
	residence?	☐ Yes.	Has yo	our landlord obta	ained an eviction judgment against	you and do you want to stay in your residence?		
				No. Go to line	12.			
				Yes. Fill out In bankruptcy pet		ludgment Against You (Form 101A) and file it with this		

Case 15-40857 Doc 1 Filed 12/01/15 Entered 12/01/15 10:14:05 Desc Main

Deb	otor 1 Valerie L Dozier			Document Pa	age 4 of 56	Case number (if known	)	
Par	t 3: Report About Any B	usinesses	You Own as	a Sole Proprietor				
	Are you a sole proprietor of any full- or part-time business?		Go to Pa	·				
		☐ Yes.	Name ar	d location of business				
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			business, if any				_
	If you have more than one sole proprietorship, use a separate sheet and attach		Number,	Street, City, State & ZIP Cod	de			_
	it to this petition.		Check th	e appropriate box to describe	your business:			
				ealth Care Business (as defir	ned in 11 U.S.C. §	§ 101(27A))		
				ingle Asset Real Estate (as d	lefined in 11 U.S.0	C. § 101(51B))		
				tockbroker (as defined in 11 l	U.S.C. § 101(53A	))		
				ommodity Broker (as defined	l in 11 U.S.C. § 10	01(6))		
				one of the above				
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline e operation	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropries deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the process in 11 U.S.C. 1116(1)(B).				t, statement of	
	For a definition of small	■ No.	I am not	filing under Chapter 11.				
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing Code.	g under Chapter 11, but I am	NOT a small busi	iness debtor according	g to the definition in th	e Bankruptcy
		☐ Yes.	I am filin	g under Chapter 11 and I am	a small business	debtor according to the	ne definition in the Bar	nkruptcy Code
Par	t 4: Report if You Own o	or Have Any	y Hazardous	Property or Any Property T	hat Needs Imme	diate Attention		
14.	Do you own or have any	■ No.						
	property that poses or is alleged to pose a threat of imminent and	☐ Yes.	What is the	hazard?				
	identifiable hazard to public health or safety?							
	Or do you own any property that needs immediate attention?			e attention is y is it needed?				
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is th	e property?				
	urgent repairs?			Ni		0.1		

Number, Street, City, State & Zip Code

Case 15-40857 Doc 1 Filed 12/01/15 Entered 12/01/15 10:14:05 Desc Main

Page 5 of 56 Document Case number (if known) Debtor 1 Valerie L Dozier

Part 5:

15. Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

Explain Your Efforts to Receive a Briefing About Credit Counseling

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes

me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes 

me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military

combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not require	d to receive a	briefing	about credit
counseling beca	use of		

Incapacity. I have a mental illness or a mental deficiency that makes me incapable

of realizing or making rational decisions about finances.

My physical disability causes me to Disability.

be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried

to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing

about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 15-40857 Doc 1 Filed 12/01/15 Entered 12/01/15 10:14:05 Desc Main Document Page 6 of 56

Deb	otor 1 Valerie L Dozier				Case numbe	(if known)		
Par	t 6: Answer These Quest	ions for Rep	porting Purposes					
16.	What kind of debts do you have?		Are your debts primarily cons			ned in 11 U.S.C. § 101(8) as "incurred by an		
		1	☐ No. Go to line 16b.					
		I	Yes. Go to line 17.					
			Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.					
		I	☐ No. Go to line 16c.					
		I	☐ Yes. Go to line 17.					
		16c.	State the type of debts you owe	e that are not consu	mer debts or busines	ss debts		
17.	Are you filing under Chapter 7?	□ No.	am not filing under Chapter 7.	Go to line 18.				
	Do you estimate that after any exempt property is excluded and		am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?					
	administrative expenses are paid that funds will be available for distribution to unsecured creditors?		No					
		I	□ Yes					
18.	How many Creditors do	<b>1</b> -49		<b>1</b> ,000-5,000	)	□ 25,001-50,000		
	you estimate that you owe?	☐ 50-99		<b>5001-10,000</b>	0	<b>5</b> 0,001-100,000		
	one.	☐ 100-199 ☐ 200-999		☐ 10,001-25,0	000	☐ More than100,000		
19.	How much do you estimate your assets to	<b>=</b> \$0 - \$50		□ \$1,000,001		□ \$500,000,001 - \$1 billion		
	be worth?		I - \$100,000 D1 - \$500,000	□ \$10,000,00°	1 - \$50 million 1 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion		
			01 - \$1 million		01 - \$500 million	☐ More than \$50 billion		
20.	How much do you estimate your liabilities	\$0 - \$50		□ \$1,000,001 □ \$10,000,00		□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion		
	to be?		1 - \$100,000 01 - \$500,000		1 - \$100 million	□ \$10,000,000,001 - \$10 billion		
			01 - \$1 million	□ \$100,000,00	01 - \$500 million	☐ More than \$50 billion		
Par	t 7: Sign Below							
For	you	I have exa	mined this petition, and I decla	re under penalty of	perjury that the inforr	mation provided is true and correct.		
						, under Chapter 7, 11,12, or 13 of title 11, noose to proceed under Chapter 7.		
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).						
		I request re	elief in accordance with the cha	apter of title 11, Unit	ted States Code, spe	cified in this petition.		
		bankruptcy 1519, and	case can result in fines up to 3571.			or property by fraud in connection with a years, or both. 18 U.S.C. §§ 152, 1341,		
		Valerie L			Signature of Debto	72		
		Signature	of Debtor 1					
		Executed of	December 1, 2015  MM / DD / YYYY		Executed on MM	/ DD / YYYY		

Case 15-40857 Doc 1 Filed 12/01/15 Entered 12/01/15 10:14:05 Desc Main Document Page 7 of 56

Debtor 1 Valerie L Dozier Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Alexand	der Tynkov	Date	December 1, 2015
Signature of	Attorney for Debtor		MM / DD / YYYY
Alexander	Tynkov		
Printed name			
Zalutsky &	Pinski, Ltd.		
111 W. Wa	shington		
Suite 1550	•		
Chicago, I	L 60602		
Number, Street,	City, State & ZIP Code		
Contact phone	312-782-9792	Email address	admin@ZAPLawFirm.com
6273193			
Bar number & St	ato		

Case 15-40857 Doc 1 Filed 12/01/15 Entered 12/01/15 10:14:05 Desc Main

		Document	Tauc o or so	
Fill in this infor	mation to identify your	case:		
Debtor 1	Valerie L Dozier			
	First Name	Middle Name	Last Name	
Debtor 2				
Spouse if, filing)	First Name	Middle Name	Last Name	
Jnited States Ba	ankruptcy Court for the:	NORTHERN DISTRICT OF IL	LLINOIS	
Case number _				

☐ Check if this is an amended filing

### Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Pai	t 1: Summarize Your Assets		
		Your as	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	4,012.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	4,012.00
Pai	t 2: Summarize Your Liabilities		
			<b>abilities</b> t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	10,000.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	10,130.00
	Your total liabilities	\$	20,130.00
Pai	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	888.33
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	874.00
Pai	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your content of	our other sc	chedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a personal	, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

Entered 12/01/15 10:14:05 Doc 1 Filed 12/01/15 Desc Main Case 15-40857 Document

Page 9 of 56
Case number (if known) Debtor 1 Valerie L Dozier

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; <b>OR</b> , Form 122B Line 11; <b>OR</b> , Form 122C-1 Line 14.	\$	1,788.83
		1	

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	10,000.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	10,000.00

Case 15-40857 Doc 1 Filed 12/01/15 Entered 12/01/15 10:14:05 Desc Main Page 10 of 56 Document Fill in this information to identify your case and this filing: Debtor 1 Valerie L Dozier Middle Name Last Name First Name Debtor 2 First Name Middle Name Last Name (Spouse, if filing) United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. ☐ Yes. Where is the property? **Describe Your Vehicles** Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ■ No ☐ Yes 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$0.00 pages you have attached for Part 2. Write that number here.....=> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware ☐ No Yes. Describe.....

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

☐ No

Yes. Describe.....

4 rooms of furniture and household goods

\$800.00

Doc 1 Filed 12/01/15 Entered 12/01/15 10:14:05 Desc Main Case 15-40857 Page 11 of 56

Case number (if known)

Document Valerie L Dozier

	Standard electronics (TV, DVD player, computer)	\$0.00
8.	Collectibles of value  Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; state other collections, memorabilia, collectibles  ■ No  □ Yes. Describe	nmp, coin, or baseball card collections;
9.	Equipment for sports and hobbies  Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis musical instruments  ■ No  □ Yes. Describe	canoes and kayaks; carpentry tools;
10	<ul> <li>Firearms         <ul> <li>Examples: Pistols, rifles, shotguns, ammunition, and related equipment</li> </ul> </li> <li>■ No</li> <li>□ Yes. Describe</li> </ul>	
11	. Clothes  Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories  No  Yes. Describe  used personal clothing	\$500.00
12	<ul> <li>Jewelry         <ul> <li>Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches</li> <li>No</li> <li>Yes. Describe</li> </ul> </li> </ul>	, gems, gold, silver
13	Non-farm animals  Examples: Dogs, cats, birds, horses  No  □ Yes. Describe	
14	<ul> <li>Any other personal and household items you did not already list, including any health aids you did n         ■ No         □ Yes. Give specific information</li> </ul>	ot list
1	5. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attaction for Part 3. Write that number here	\$1,300.00
Р	art 4: Describe Your Financial Assets	
D	o you own or have any legal or equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16	<ul> <li>Cash         Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file y         ■ No         □ Yes     </li> </ul>	our petition
17	<ul> <li>Deposits of money         Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, br institutions. If you have multiple accounts with the same institution, list each.     </li> <li>No</li> </ul>	okerage houses, and other similar
	Yes Institution name:	
	17.1. Checking E-Trade account	\$50.00

Schedule A/B: Property

Debtor 1

Case 15-40857 Doc 1 Filed 12/01/15 Entered 12/01/15 10:14:05 Desc Main Document Page 12 of 56

Case number (if known) Debtor 1 Valerie L Dozier 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: ☐ Yes. ..... 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ■ No ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you Yes. Give specific information about them, including whether you already filed the returns and the tax years...... Expected refund 2014 and 2015 \$2.662.00 Official Form 106A/B Schedule A/B: Property

page 3

Case 15-40857 Doc 1 Filed 12/01/15 Entered 12/01/15 10:14:05 Desc Main Document Page 13 of 56 Case number (if known) Debtor 1 Valerie L Dozier 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information...... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ☐ Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$2,712.00 for Part 4. Write that number here..... Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7.

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

Official Form 106A/B Schedule A/B: Property

☐ Yes. Go to line 47.

page 4

Current value of the portion you own?
Do not deduct secured claims or exemptions.

Filed 12/01/15 Entered 12/01/15 10:14:05 Document Page 14 of 56 Debtor 1 Valerie L Dozier Case number (if known) 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here ...... \$0.00 List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$0.00 56. Part 2: Total vehicles, line 5 \$0.00 57. Part 3: Total personal and household items, line 15 \$1,300.00 58. Part 4: Total financial assets, line 36 \$2,712.00 Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00

\$4,012.00

Copy personal property total

63. Total of all property on Schedule A/B. Add line 55 + line 62

Total personal property. Add lines 56 through 61...

Case 15-40857

Doc 1

\$4,012.00

\$4,012.00

Desc Main

Official Form 106A/B Schedule A/B: Property page 5

С	ase 15-40857	Doc 1	Filed 12/01/1 Document	.5 Entered 12/01/15 10:1- Page 15 of 56	4:05 Des	sc Main
Fill in this info	rmation to identify yo	our case:				
Debtor 1	Valerie L Dozie				7	
Debtor 2	First Name	Mic	ddle Name	Last Name		
(Spouse if, filing)	First Name	Mic	ddle Name	Last Name		
United States E	Bankruptcy Court for the	e: NORTH	HERN DISTRICT OF	ILLINOIS		
Case number						
(if known)						heck if this is an mended filing
Official F	orm 106C					
		roper	tv You Cla	im as Exempt		12/15
Be as complete the property you	and accurate as possil	ole. If two ma	arried people are filing Official Form 106A/B	together, both are equally responsible to as your source, list the property that you	u claim as exen	npt. If more space is

Jsing needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a

spe any fun exe	ecific dollar amount as exempt. Alternatively applicable statutory limit. Some exemption nds—may be unlimited in dollar amount. Howerption to a particular dollar amount and the applicable statutory amount.	y, you may claim the f ns—such as those for wever, if you claim ar	ull fa heal exer	ir market value of the property be th aids, rights to receive certain l nption of 100% of fair market val	eing exempted up to the amount of benefits, and tax-exempt retirement ue under a law that limits the
Pa	art 1: Identify the Property You Claim as E	Exempt			
1.	Which set of exemptions are you claiming	? Check one only, eve	n if yo	our spouse is filing with you.	
	■ You are claiming state and federal nonban	kruptcy exemptions.	11 U.S	S.C. § 522(b)(3)	
	☐ You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)			
2.	For any property you list on Schedule A/B	that you claim as exe	empt,	fill in the information below.	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	4 rooms of furniture and household goods	\$800.00		\$800.00	735 ILCS 5/12-1001(b)
	Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
	used personal clothing Line from Schedule A/B: 11.1	\$500.00		100%	735 ILCS 5/12-1001(a)
	Line Ironi Scriedule A/B. 11.1			100% of fair market value, up to any applicable statutory limit	
	Checking: E-Trade account Line from Schedule A/B: 17.1	\$50.00		\$50.00	735 ILCS 5/12-1001(b)
	Line Ironi Scriedule A/B. 17.1			100% of fair market value, up to any applicable statutory limit	
	Expected refund 2014 and 2015 Line from Schedule A/B: 28.1	\$2,662.00		\$1,722.00	735 ILCS 5/12-1001(b)
	Line Holli Golledale PVB. 20.1			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/16 and every № No  Yes. Did you acquire the property covered.	3 years after that for ca	ases f	·	,
	□ No				
	☐ Yes				

Official Form 106C

Doc 1 Filed 12/01/15 Entered 12/01/15 10:14:05 Desc Main Case 15-40857 Page 16 of 56
Case number (if known) Document

Debtor 1 Valerie L Dozier

Case 15-40857 Doc 1 Filed 12/01/15 Entered 12/01/15 10:14:05 Desc Main

Fill in this infor	mation to identify your	case:		
Debtor 1	Valerie L Dozier			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an
				amended filing

### Official Form 106D

## Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
  - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below.

Case 15-40857 Doc 1 Filed 12/01/15 Entered 12/01/15 10:14:05 Desc Main

Ou	30 10 40007	Document	Page 18 of	56	.00 Doc	o man
Fill in this inforn	nation to identify your	case:				
Debtor 1	Valerie L Dozier					
Dahtaro	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bar	nkruptcy Court for the:	NORTHERN DISTRICT OF ILLI	INOIS			
	mapley countries and					
Case number (if known)					_	theck if this is an mended filing
Official For Schedule F		Who Have Unsecur	ed Claims			12/15
any executory contr Schedule G: Execut D: Creditors Who Ha the Continuation Pa number (if known).	acts or unexpired leases to ory Contracts and Unexpi ave Claims Secured by Pr	e Part 1 for creditors with PRIORITY of that could result in a claim. Also list red Leases (Official Form 106G). Do operty. If more space is needed, cop- ve no information to report in a Part, o	executory contracts not include any cred y the Part you need,	on Schedule A/B: Pro litors with partially se fill it out, number the	operty (Official cured claims th entries in the b	Form 106A/B) and on at are listed in Schedule oxes on the left. Attach
	litors have priority unsecu					
No. Go to		ned ciainis against you?				
_	) Part 2.					
identify what possible, list Part 1. If mo	type of claim it is. If a claim the claims in alphabetical or than one creditor holds a	ims. If a creditor has more than one price has both priority and nonpriority amour order according to the creditor's name. It particular claim, list the other creditors	nts, list that claim here f you have more than in Part 3.	e and show both priority two priority unsecured	and nonpriority	amounts. As much as
(For an expired)	anation of each type of clain	n, see the instructions for this form in th	e instruction booklet.)	Total claim	Priority amount	Nonpriority amount
Internal	Revenue Service	Last 4 digits of account nun	nber	\$\$	\$	0.00 \$ \$10,000.00
Dept of P.O. Bo		When was the debt incurred	prior to 20	011	-	
	lphia, PA 19101 reet City State Zlp Code	As of the date you file, the c	claim is: Check all th	at apply		
Who incur	red the debt? Check one.	☐ Contingent				
■ Debtor	-	_				
☐ Debtor	2 only	☐ Unliquidated				
☐ Debtor	1 and Debtor 2 only	☐ Disputed				
☐ At least	one of the debtors and and					
☐ Check communit	if this claim is for a y debt	Type of PRIORITY unsecure	ed claim:			
Is the clair	n subject to offset?	☐ Domestic support obligation	ons			
■ No		Taxes and certain other de	ebts you owe the gove	ernment		
☐ Yes		☐ Claims for death or persor	nal injury while you we	ere intoxicated		
		Other. Specify				
		b	ack taxes			
Part 2: List Al	of Your NONPRIORIT	Y Unsecured Claims				
3. Do any cred	litors have nonpriority uns	secured claims against you?				
☐ No. You	have nothing to report in thi	s part. Submit this form to the court with	n your other schedules	S.		
Yes.						

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

Doc 1 Filed 12/01/15 Entered 12/01/15 10:14:05 Desc Main Case 15-40857 Document

Page 19 of 56
Case number (if know) Debtor 1 Valerie L Dozier

				Total cl	aim
1.1	Metropolitan Advanced Radiolog	Last 4 digits of account number	6088	\$	22.00
	Priority Creditor's Name C/O Atg Credit 1043 W. Grandville Chicago, IL 60660	When was the debt incurred?	Opened 10/01/15		
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent			
	Debtor 1 only				
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community debt	☐ Student loans			
	Is the claim subject to offset?	Obligations arising out of a sepanot report as priority claims	aration agreement or divorce that you did		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	Other. Specify	ction		
1.2	Americash	Last 4 digits of account number		\$	1,608.00
	Priority Creditor's Name  7454 South Cicero When was the debt incurred?				
	Bedford Park, IL 60629  Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent			
	■ Debtor 1 only	□ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community debt	☐ Student loans			
	Is the claim subject to offset?	☐ Obligations arising out of a sepa	aration agreement or divorce that you did		
	■ No	☐ Debts to pension or profit-sharir	ng plans, and other similar debts		
	☐Yes	Other. Specify payda	y loan		
1.3	Att Midwest	Last 4 digits of account number	8001	\$	197.00
	Priority Creditor's Name	-		<b>*</b>	
	IC Systems, Inc 444 Highway 96 East, Po Box 64378	When was the debt incurred?	Opened 11/01/14		
	St Paul, MN 55164	As of the date were file the state of	in Chapt all that annly		
	Number Street City State Zlp Code	As of the date you file, the claim	s: Uneck all that apply		

Debtor	Case 15-40857 Doc 1	Filed 12/01/15 Entero Document Page 2	ed 12/01/15 10:14:05 0 of 56 Case number (if know)	Desc Main	
	Who incurred the debt? Check one.	☐ Contingent			
	■ Debtor 1 only □ Debtor 2 only	☐ Unliquidated			
	Debtor 2 only	☐ Onliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed	1.1		
	At least one of the debtors and another	Type of NONPRIORITY unsecured of	iaim:		
	☐ Check if this claim is for a community debt	☐ Student loans			
	Is the claim subject to offset?	☐ Obligations arising out of a separa not report as priority claims	tion agreement or divorce that you did		
	■ No	☐ Debts to pension or profit-sharing	plans, and other similar debts		
	Yes	Other. Specify Collection	on		
4.4	Att Midwest	Last 4 digits of account number	8001	\$	197.00
	Priority Creditor's Name	Last 4 digits of account number		Ψ	
	IC Systems, Inc 444 Highway 96 East, Po Box 64378	When was the debt incurred?	Opened 11/01/14		
	St Paul, MN 55164  Number Street City State Zlp Code	As of the date you file, the claim is:	Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent			
	■ Debtor 1 only	□ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured of	laim:		
	☐ Check if this claim is for a community debt	☐ Student loans			
	Is the claim subject to offset?	☐ Obligations arising out of a separa	tion agreement or divorce that you did		
	_	not report as priority claims			
	■ No	☐ Debts to pension or profit-sharing			
	Yes	Other. Specify Collecti	on		
4.5	Chicago Imaging Associates	Last 4 digits of account number	1136	\$	147.00
	Priority Creditor's Name  Merchants Cr	When was the debt incurred?	Opened 2/01/13		
	223 W. Jackson Blvd., Suite 400 Chicago, IL 60606	-	opolica 201/10		
	Number Street City State Zlp Code	As of the date you file, the claim is:	Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent			
	■ Debtor 1 only				
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured of	laim:		
	☐ Check if this claim is for a community debt	☐ Student loans			
	Is the claim subject to offset?	☐ Obligations arising out of a separa not report as priority claims	tion agreement or divorce that you did		
	■ No	Debts to pension or profit-sharing	plans, and other similar debts		
	Yes	■ Other. Specify Collecti	on		
4.6	Chicago Northside Mri	Last 4 digits of account number	4588	\$	123.00

Official Form 106 E/F

Priority Creditor's Name

Case 15-40857 Doc 1 Filed 12/01/15 Entered 12/01/15 10:14:05 Desc Main Document Page 21 of 56

eptor	1 Valerie L Dozier		Case number (if know)	
	Keynote Consulting 220 West Campus Drive, Suite 102	When was the debt incurred?	Opened 9/01/11	
	Arlington Heights, IL 60004  Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.  □ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecure	d claim:	
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt	☐ Student loans	a ciami.	
	Is the claim subject to offset?	☐ Obligations arising out of a sepa	aration agreement or divorce that you did	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Collect	etion	
.7	Emergency Physician Mgmt Srvs Priority Creditor's Name	Last 4 digits of account number	4845	\$ 189.00
	Cda/pontiac Po Box 213	When was the debt incurred?	Opened 4/01/10	
	Streator, IL 61364  Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent		
	■ Debtor 1 only	- Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	☐ Obligations arising out of a sepanot report as priority claims	aration agreement or divorce that you did	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify	ction	
.8	Emergency Physician Mgmt Srvs	Last 4 digits of account number	4845	\$ 189.00
	Priority Creditor's Name Cda/pontiac Po Box 213 Streator, IL 61364	When was the debt incurred?	Opened 4/01/10	

As of the date you file, the claim is: Check all that apply

Number Street City State Zlp Code

Debto	Case 15-40857 Doc 1		ered 12/01/15 10:14:05 22 of 56 Case number (if know)	Desc Main	
	Who incurred the debt? Check one.				
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community debt	☐ Student loans			
	Is the claim subject to offset?	☐ Obligations arising out of a sepanot report as priority claims	aration agreement or divorce that you did		
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts		
	Yes	Other. Specify	ctin		
4.9	Evergreen Terrace Apartments	Last 4 digits of account number		\$	2,000.00
	Priority Creditor's Name 425 W. Evergreen Chicago, IL 60610	When was the debt incurred?			
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent			
	■ Debtor 1 only				
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community ☐ Student loans debt				
	Is the claim subject to offset?	☐ Obligations arising out of a sepanot report as priority claims	aration agreement or divorce that you did		
	■ No	☐ Debts to pension or profit-sharing	ng plans, and other similar debts		
	Yes	Other. Specify back	rent		
4.10	Fingerhut Freshstart	Last 4 digits of account number	0003	\$	115.00
	Priority Creditor's Name  Jefferson Capital Systems, LLC  16 Mcleland Rd	When was the debt incurred?	Opened 1/01/14		
	Saint Cloud, MN 56303  Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent			
	■ Debtor 1 only	- Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community debt	☐ Student loans			
	Is the claim subject to offset?	☐ Obligations arising out of a sepanot report as priority claims	aration agreement or divorce that you did		
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts		
	Yes	Other. Specify	ction		
4.11	Gold Coast Animal Hospital	Last 4 digits of account number	7951	\$	123.00
	Priority Creditor's Name Diversified Svs Group 1824 W Grand Ave - Suite 200	When was the debt incurred?			

Chicago, IL 60622

Case 15-40857 Doc 1 Filed 12/01/15 Entered 12/01/15 10:14:05 Desc Main Document Page 23 of 56 Case number (if know) Debtor 1 Valerie L Dozier Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. □ Contingent ■ Debtor 1 only Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans debt Is the claim subject to offset? lacksquare Obligations arising out of a separation agreement or divorce that you did not report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Collection Other. Specify 4.12 7951 123.00 **Gold Coast Animal Hospital** Last 4 digits of account number Priority Creditor's Name **Diversified Svs Group** When was the debt incurred? 1824 W Grand Ave - Suite 200 Chicago, IL 60622 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. □ Contingent ■ Debtor 1 only Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim:  $\hfill \square$  At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Collection Other. Specify 4.13 Med1 02 Lincoln Park 0452 249.00 **Anesthesia** Last 4 digits of account number Priority Creditor's Name When was the debt incurred? Opened 2/01/15 Med Business Bureau Po Box 1219 Park Ridge, IL 60068 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans debt Is the claim subject to offset?  $\square$  Obligations arising out of a separation agreement or divorce that you did not report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts

4.14 Metropolitan Advanced Radiolog

Last 4 digits of account number

Other. Specify

6088

Collection

22.00

☐ Yes

Case 15-40857 Doc 1 Filed 12/01/15 Entered 12/01/15 10:14:05 Desc Main Document Page 24 of 56
Case number (if know)

Valerie L Doziei		Case Humber (II know)		
Priority Creditor's Name C/O Atg Credit 1043 W. Grandville Chicago II 60660	When was the debt incurred?	Opened 10/01/15		
Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply		
Who incurred the debt? Check one.	☐ Contingent			
Debtor 1 only				
☐ Debtor 2 only	☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
Check if this claim is for a community	☐ Student loans			
ls the claim subject to offset?	☐ Obligations arising out of a sepa not report as priority claims	aration agreement or divorce that you did		
No	Debts to pension or profit-sharing	g plans, and other similar debts		
Yes	Other. Specify Collect	etion		
Peoples Gas	Last 4 digits of account number	9218	\$	148.00
Priority Creditor's Name 200 E Randolph St 20th Floor Chicago II 60601	When was the debt incurred?	Opened 6/30/14 Last Active 12/15/14		
Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply		
Who incurred the debt? Check one.	☐ Contingent			
■ Debtor 1 only				
☐ Debtor 2 only	☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only	☐ Disputed			
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
☐ Check if this claim is for a community	☐ Student loans			
Is the claim subject to offset?	☐ Obligations arising out of a sepa not report as priority claims	aration agreement or divorce that you did		
No	Debts to pension or profit-sharing	g plans, and other similar debts		
Yes	Other. Specify Agricu	ulture		
Presence Medical Group	Last 4 digits of account number	1537	\$	115.00
Priority Creditor's Name Pellettieri 991 Oak Creek Dr	When was the debt incurred?			
Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply		
	Priority Creditor's Name C/O Atg Credit 1043 W. Grandville Chicago, IL 60660 Number Street City State Zlp Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No Yes  Peoples Gas Priority Creditor's Name 200 E Randolph St 20th Floor Chicago, IL 60601 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No Yes  Presence Medical Group Priority Creditor's Name Pellettieri 991 Oak Creek Dr Lombard, IL 60148	Priority Creditor's Name C/O Atg Credit 1043 W. Grandville Chicago, IL 60660 Number Street City State Zlp Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  Peoples Gas Priority Creditor's Name 200 E Randolph St 20th Floor Chicago, IL 60601 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Check if this claim is for a community debt Is the claim subject to offset?  When was the debt incurred?  Last 4 digits of account number When was the debt incurred?  As of the date you file, the claim in the cl	Priority Creditor's Name C/O Atg Credit Chicago, IL 60860 Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Latest one of the debtors and another Check if this claim is for a community debt is the claim subject to offset?  Peoples Gas Priority Creditor's Name 200 E Randolph St 20th Floor Chicago, IL 60860 Number Street City State Zip Code Who incurred the debt? Check one.  Peoples Gas Priority Creditor's Name 200 E Randolph St 20th Floor Chicago, IL 60861 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 3 only Debtor 4 and Debtor 2 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 1 only Debtor 7 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 6 only Disputed Type of NONPRIORITY unsecured claim: Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Debtor 1 only Debtor 2 only Disputed Type of NoNPRIORITY unsecured claim: Debtor 1 only Debtor 2 only Disputed Type of NoNPRIORITY unsecured claim: Debtor 1 only Debtor 2 only Disputed Type of NonPRIORITY unsecured claim: Debtor 1 only Debtor 3 only Debtor 4 only Disputed Type of NonPRIORITY unsecured claim: Debtor 1 only Debtor 2 only Disputed Type of NonPRIORITY unsecured claim: Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 4 only Debtor 5 only De	Priority Creditor's Name C/O Atg Credit 1043 W. Grandville Chicago, IL 60660 Number Street City State ZIp Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 2 only Debtor 1 sand Debtor 3 onless the claim subject to offset?    As of the date you file, the claim is check all that apply   Contingent

Debto	Case 15-40857 Doc 1	Filed 12/01/15 Entered 12/01/15 10:14:05  Document Page 25 of 56  Case number (if know)	Desc Main	
	Who incurred the debt? Check one.			
	Debtor 1 only	Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	$\square$ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts		
	Yes	■ Other. Specify Medical		
1.17	Presence Medical Group	Last 4 digits of account number 1542	\$	115.00
	Priority Creditor's Name Pellettieri 991 Oak Creek Dr	When was the debt incurred?		
	Lombard, IL 60148  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent		
	Debtor 1 only			
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	$\hfill \square$ Debts to pension or profit-sharing plans, and other similar debts		
	Yes	■ Other. Specify Medical		
4.18	Presence Saint Joseph Hospital	Last 4 digits of account number 4790	\$	1,938.00
	Priority Creditor's Name 8231 185th St Ste 100 8231 185th St Ste 100	When was the debt incurred? Opened 9/01/13		
	Tinley Park, IL 60487  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent		
	Debtor 1 only			
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts		
	Yes	■ Other. Specify CollectionI		

4.19 Rcn
Priority Creditor's Name

Last 4 digits of account number

5001

Page 8 of 11

665.00

Case 15-40857 Doc 1 Filed 12/01/15 Entered 12/01/15 10:14:05 Desc Main Document Page 26 of 56
Case number (if know)

Debtor	1 Valerie L Dozier		Case number (if know)	
	IC Systems, Inc 444 Highway 96 East, Po Box 64378 St Paul, MN 55164	When was the debt incurred?	Opened 11/01/12	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent		
	■ Debtor 1 only			
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	☐ Obligations arising out of a sepanot report as priority claims	aration agreement or divorce that you did	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify	ction	
4.20	Rcn	Last 4 digits of account number	5001	\$ 665.00
	Priority Creditor's Name IC Systems, Inc 444 Highway 96 East,Po Box 64378 St Paul, MN 55164	When was the debt incurred?	Opened 11/01/12	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent		
	■ Debtor 1 only			
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	☐ Obligations arising out of a sepanot report as priority claims	aration agreement or divorce that you did	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify	ction	
4.21	Saint Joseph Hospital	Last 4 digits of account number	3003	\$ 590.00
	Priority Creditor's Name Grant & Weber 26575 W. Agoura Rd.	When was the debt incurred?	Opened 12/01/12	
	Calabasas, CA 91302 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	

Debtor	1 Valerie L Dozier	Document	Page	2/ 0T 56 Case number (if know)				
	Who incurred the debt? Check one.	☐ Contingent						
	■ Debtor 1 only	<b>—</b> Contingont						
	Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY	unsecure	l claim:				
	☐ Check if this claim is for a community debt	☐ Student loans						
	Is the claim subject to offset?	Obligations arising ou not report as priority claim						
	No	Debts to pension or pr	g plans, and other similar debts					
	Yes	Other. Specify	Collec	etion				
4.22	Saint Joseph Hospital	Last 4 digits of account	number	3003	\$	590.00		
	Priority Creditor's Name C/O Grant & Weber 26575 W. Agoura Rd. Calabasas, CA 91302	When was the debt incu	ırred?	Opened 12/01/12				
-	Number Street City State Zlp Code	As of the date you file, t	he claim i	s: Check all that apply				
	Who incurred the debt? Check one.	☐ Contingent						
	■ Debtor 1 only							
	☐ Debtor 2 only	■ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	☐ Disputed					
	☐ At least one of the debtors and another							
	☐ Check if this claim is for a community debt	☐ Student loans						
	Is the claim subject to offset?	fset? □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts						
	■ No							
	Yes	Other. Specify	Collec	etion				
	List Others to Be Notified About a Dispage only if you have others to be notified to collect from you for a debt you owe to sor	about your bankruptcy, for a	debt that					
more t	than one creditor for any of the debts that you bts in Parts 1 or 2, do not fill out or submit the	u listed in Parts 1 or 2, list the						
	Address			Part2 did you list the original cred				
	/ James V 185TH STREET	Line 4.21 of (Check or	ne):	Part 1: Creditors with Priority Uni				
	Park, IL 60487			■ Part 2: Creditors with Nonpriority	Unsecure	d Claims		
		Last 4 digits of account number						
Name	Address	On which entry in Pa	rt 1 or I	Part2 did you list the original cred	itor?			
	y, James	Line 4.21 of (Check or	ne):	☐ Part 1: Creditors with Priority Un	secured Cl	aims		
	V. 103rd St. awn, IL 60453			■ Part 2: Creditors with Nonpriority	Unsecure	d Claims		
oun =	, 12 00 100	nber						
HUSB	Address Y MARVIN L III	On which entry in Pa		Part2 did you list the original cred ☐ Part 1: Creditors with Priority Un		aims		
	ARMITAGE go, IL 60614			■ Part 2: Creditors with Nonpriority	Unsecure	d Claims		
Onica	yo, iL 00017	Last 4 digits of acco	unt nun	nber				
Name	Address	On which entry in Pa	rt 1 or l	Part2 did you list the original cred	itor?			
	Gately	Line 4.16 of (Check of		☐ Part 1: Creditors with Priority Un		aims		
	V 185th St Park, IL 60487		•	■ Part 2: Creditors with Nonpriority				

Case 15-40857 Doc 1 Filed 12/01/15 Entered 12/01/15 10:14:05 Desc Main

Official Form 106 E/F

Case 15-40857 Doc 1 Filed 12/01/15 Entered 12/01/15 10:14:05 Desc Main Document Page 28 of 56

Debtor 1 Valerie L Dozier Case number (if know)

#### Last 4 digits of account number

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total cla	nim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	10,000.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total. Add lines 6a through 6d.	6e.	\$	10,000.00
	01	Or hostern	01	Total Claim	
	6f.	Student loans	6f.	\$	0.00
Total claims	0	Obligations minimum of a second in a second or discount that second			
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	10,130.00
	6j.	Total. Add lines 6f through 6i.	6j.	\$	10,130.00

Case 15-40857 Doc 1 Filed 12/01/15 Entered 12/01/15 10:14:05 Desc Main

Fill in this infor	mation to identify your	case:		
Debtor 1	Valerie L Dozier			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(				

### Official Form 106G

## **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?
  - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 Evergreen Terrace Apartments
425 W. Evergreen
Chicago, IL 60610

State what the contract or lease is for
1 year lease renews 8/2015

Case 15-40857 Doc 1 Filed 12/01/15 Entered 12/01/15 10:14:05 Desc Main

		Docume	ent Page 30 c	of 56
Fill in this	information to identify your	case:		
Debtor 1	Valerie L Dozier			
<b>D</b> 1 / 0	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing	ng) First Name	Middle Name	Last Name	
United Sta	ites Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case num	hor			
(if known)				☐ Check if this is an amended filing
Officia	l Form 106H			
	lule H: Your Cod	obtors		42/45
Scried	iule II. Toul Cou	EDIOI 2		12/15
1. Do	and case number (if known)			e as a codebtor.
■ No □ Yes	5			
	hin the last 8 years, have you a, California, Idaho, Louisiana,			ry? (Community property states and territories include ington, and Wisconsin.)
7 (112011	a, Camorna, raano, Louiciana,	, rtorada, rtorr moxico, r c	iono moo, romo, vvaon	migron, and Wicconomy
	Go to line 3.			
⊔ Yes	s. Did your spouse, former spo	use, or legal equivalent liv	e with you at the time?	
in line Form	2 again as a codebtor only i	f that person is a guara	ntor or cosigner. Make	r if your spouse is filing with you. List the person showr sure you have listed the creditor on Schedule D (Officia 06G). Use Schedule D, Schedule E/F, or Schedule G to
	Column 1: Your codebtor Name, Number, Street, City, State and Zl	IP Code		Column 2: The creditor to whom you owe the debt Check all schedules that apply:
3.1				☐ Schedule D, line
	Name			☐ Schedule E/F, line
				☐ Schedule G, line
	Number Street City	State	ZIP Code	_
3.2				□ Sahadula D. lina
	Name			_ □ Schedule D, line □ Schedule E/F, line
				☐ Schedule G, line
-	Number Street			_
	City	State	ZIP Code	

# Case 15-40857 Doc 1 Filed 12/01/15 Entered 12/01/15 10:14:05 Desc Main Document Page 31 of 56

Fill	in this information to identify your	case:							
	otor 1 Valerie L Do								
	otor 2				_				
Uni	ted States Bankruptcy Court for the	e: NORTHERN DISTRIC	CT OF ILLINOIS		_				
	se number 		-			Check if this is  An amende  A supplem	ed filing ent showing	postpetition	
0	fficial Form 106I					MM / DD/ \		lowing date.	•
	chedule I: Your Inc	ome				IVIIVI / DD/			12/15
sup spo atta	as complete and accurate as posplying correct information. If you use. If you are separated and you che a separate sheet to this form.  The Describe Employment	i are married and not fili ur spouse is not filing w On the top of any additi	ng jointly, and your ith you, do not inclu	spouse de infor	is liv mati	ring with you, inc on about your sp	lude inform ouse. If mo	nation abou ore space is	it your needed,
1.	Fill in your employment information.		Debtor 1			Debtor 2	2 or non-fili	ing spouse	
	If you have more than one job,	F	■ Employed			☐ Empl	☐ Employed		
	attach a separate page with information about additional	Employment status	☐ Not employed			☐ Not e	☐ Not employed		
	employers.	Occupation	Shift supervisor						
	Include part-time, seasonal, or self-employed work.	Employer's name	CVS						
	Occupation may include student or homemaker, if it applies.	Employer's address	Attn: Retail Acc PO BOX 277 Chaska, MN 553		J				
		How long employed t	here? 8 years						
Par	t 2: Give Details About Mo	nthly Income							
	mate monthly income as of the ouse unless you are separated.	late you file this form. If	you have nothing to r	eport for	any	line, write \$0 in the	e space. Inc	lude your no	on-filing
	u or your non-filing spouse have me space, attach a separate sheet to		ombine the informatio	n for all	empl	oyers for that pers	on on the lir	nes below. If	f you need
						For Debtor 1	For Debt	tor 2 or g spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	1,469.00	\$	N/A	-
3.	Estimate and list monthly over	time pay.		3.	+\$	0.00	+\$	N/A	
4.	Calculate gross Income. Add li	ne 2 + line 3.		4.	\$	1,469.00	\$	N/A	

## Case 15-40857 Doc 1 Filed 12/01/15 Entered 12/01/15 10:14:05 Desc Main Document Page 32 of 56

Deb	otor 1	Valerie L Dozier			Case	number ( <i>if kn</i>	own)				
					For	Debtor 1			Debtor		
	Cop	by line 4 here	4.		\$	1,469	.00	\$		N/A	
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a	a	\$	320	67	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b		\$		.00	\$		N/A	
	5c.	Voluntary contributions for retirement plans	50		\$		.00	\$		N/A	
	5d.	Required repayments of retirement fund loans	50		\$_		.00	\$		N/A	
	5e.	Insurance	5e	€.	\$	260		\$		N/A	
	5f.	Domestic support obligations	5f		\$	0	.00	\$		N/A	
	5g.	Union dues	50	<b>j</b> .	\$	0	.00	\$		N/A	
	5h.	Other deductions. Specify:	5h	1.+	\$	0	.00	+ \$		N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	580	.67	\$_		N/A	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	888	.33	\$_		N/A	
8.	8a. 8b.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  Interest and dividends	8a 8b		\$_ \$_		0.00	\$_ \$_		N/A N/A	
	8c.	Family support payments that you, a non-filing spouse, or a depende regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	80		\$		.00	\$_		N/A	
	8d.	Unemployment compensation	80		\$		.00	\$_		N/A	
	8e.	Social Security	86	€.	\$_	0	.00	\$_		N/A	
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistant that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  Pension or retirement income	nce 8f 8g		\$_ \$		0.00	\$_ \$		N/A N/A	
	8h.	Other monthly income. Specify:		).+	· · —		.00	+ \$		N/A	
•	A .1.							_			1
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	L	\$	U	.00	\$_		N/A	
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	\$		888.33	+ \$		N/A	= \$	888.33
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.				000.00	Ľ		14,71		
11.	Incl othe Do	te all other regular contributions to the expenses that you list in Schedule contributions from an unmarried partner, members of your household, your friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are nicify:	our dep					•			0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The te that amount on the Summary of Schedules and Statistical Summary of Cellies							e. 12.	\$	888.33
13.	Do	you expect an increase or decrease within the year after you file this for	rm?							Combin monthly	
	_	No.									

Official Form 106I Schedule I: Your Income page 2

## Case 15-40857 Doc 1 Filed 12/01/15 Entered 12/01/15 10:14:05 Desc Main Document Page 33 of 56

Fill	in this informa	tion to identify yo	our case:					
Deb	otor 1	Valerie L Do	zier				eck if this is:	
	otor 2 ouse, if filing)							g owing postpetition chapter of the following date:
Unit	ed States Bankr	uptcy Court for the:	NORTH	ERN DISTRICT OF ILLIN	OIS		MM / DD / YYYY	
	e number nown)							
Of	fficial Fo	rm 106J						
S	chedule	J: Your	Expen	ses				12/1
info	ormation. If m		eded, atta	If two married people a ch another sheet to this n.				
Par	t 1: Descr	ibe Your House	hold					
1.	■ No. Go to	line 2.	in a separ	ate household?				
	□ No		st file Offici	al Form 106J-2, <i>Expense</i>	s for Separate Hous	<i>ehold</i> of D	ebtor 2.	
2.	Do you have	e dependents?	■ No					
	Do not list Do and Debtor 2		☐ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state dependents							□ No □ Yes
								□ No
							<u> </u>	_ □ Yes □ No
								_ □ Yes □ No
								_ Yes
3.	expenses of	enses include f people other t d your depende	han $_{oldsymbol{\square}}$	No Yes				
Est	imate your ex		our bankrı	uptcy filing date unless y				hapter 13 case to report of the form and fill in the
the		n assistance an		government assistance cluded it on Schedule I:			Your ex	penses
4.		or home owners and any rent for th		ses for your residence.	nclude first mortgag	je 4.	\$	289.00
	If not includ	led in line 4:						
		estate taxes				4a.	·	0.00
		rty, homeowner's		's insurance ipkeep expenses		4b. 4c.		0.00
		owner's associat				4d.		0.00
5.	Additional n	nortgage navme	ents for vo	our residence, such as ho	me equity loans	5.	\$	0.00

## Case 15-40857 Doc 1 Filed 12/01/15 Entered 12/01/15 10:14:05 Desc Main Document Page 34 of 56

Deb	otor 1	Valerie L	. Dozier	Ca	ase num	ber (if known)	
6.	Utiliti	ies:					
-	6a.		, heat, natural gas		6a.	\$	200.00
	6b.		wer, garbage collection		6b.	\$	0.00
	6c.		e, cell phone, Internet, satellite, and cable	services	6c.	\$	0.00
	6d.	Other. Spe			6d.	·	0.00
7.	Food		ekeeping supplies		- 7.	·	300.00
8.			children's education costs		8.	\$	0.00
9.			ry, and dry cleaning		9.	·	0.00
		•	products and services		10.	·	0.00
		-	ntal expenses		11.	·	60.00
			Include gas, maintenance, bus or train fa	are		Ψ	00.00
12.			ar payments.	arc.	12.	\$	0.00
13.			clubs, recreation, newspapers, magaz	ines, and books	13.	\$	25.00
14.			ributions and religious donations	·	14.	\$	0.00
15.	Insur		· ·			· —	
	Do no	ot include in	surance deducted from your pay or inclu	ded in lines 4 or 20.			
	15a.	Life insura	ince		15a.	\$	0.00
	15b.	Health ins	urance		15b.	\$	0.00
	15c.	Vehicle in:	surance		15c.	\$	0.00
	15d.	Other insu	rance. Specify:		15d.	\$	0.00
16.	Taxes	s. Do not in	clude taxes deducted from your pay or in	cluded in lines 4 or 20.	_		
	Speci	ify:			16.	\$	0.00
17.			ease payments:		_		
			ents for Vehicle 1		17a.	·	0.00
	17b.	Car paym	ents for Vehicle 2		17b.	\$	0.00
		Other. Spe			_ 17c.	\$	0.00
	17d.	Other. Spe	ecify:		17d.	\$	0.00
18.	Your	payments	of alimony, maintenance, and support	that you did not report as	10	Φ.	0.00
40	dedu	icted from	your pay on line 5, Schedule I, Your In	come (Official Form 106I).	18.	·	
19.			s you make to support others who do i	iot live with you.	4.0	\$	0.00
	Speci			5 (1): ( 0 / /	19.		
20.			erty expenses not included in lines 4 c	r 5 of this form or on <i>Schedi</i>			0.00
			s on other property		20a.		0.00
		Real estat			20b.		0.00
			homeowner's, or renter's insurance		20c.		0.00
			nce, repair, and upkeep expenses		20d.	·	0.00
			er's association or condominium dues		20e.	·	0.00
21.	Othe	r: Specify:			_ 21.	_+\$	0.00
22	Calcı	ulate vour	monthly expenses				
		-	through 21.			\$	874.00
			2 (monthly expenses for Debtor 2), if any	from Official Form 106.I-2		\$	074.00
						φ	074.00
	22C. /	Add line 22	a and 22b. The result is your monthly ex	penses.		<b>&gt;</b>	874.00
23.	Calcu	ulate your	monthly net income.				
	23a.	Copy line	12 (your combined monthly income) from	Schedule I.	23a.	\$	888.33
			monthly expenses from line 22c above.		23b.	-\$	874.00
	23c.	Subtract y	our monthly expenses from your monthly	income.			44.22
		The result	is your monthly net income.		23c.	\$	14.33
	_						
24.			an increase or decrease in your expension				and or degrade baseves of a
			u expect to finish paying for your car loan within terms of your mortgage?	the year or do you expect your mor	ıyaye pa	tyment to increa	ase or decrease decause of a
	■ No						
			Evalois horo:				
	□ Ye	es.	Explain here:				

## Case 15-40857 Doc 1 Filed 12/01/15 Entered 12/01/15 10:14:05 Desc Main Document Page 35 of 56

Fill in this in	nformation to identify your	case:			
Debtor 1	Valerie L Dozier				
Dahtar 0	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States	s Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case numbe	er				☐ Check if this is an amended filing
	orm 106Dec ration About a	n Individual	Debtor's Sch	nedules	12/15
		ar marriadar	<b>D D D D D D D D D D</b>	1044100	12/13
You must file obtaining mo years, or bot		lle bankruptcy schedule n connection with a ban	s or amended schedules.	Making a false state	ement, concealing property, or 0, or imprisonment for up to 20
Did you	ı pay or agree to pay some	one who is NOT an atto	rney to help you fill out ba	nkruptcy forms?	
	No				
	Yes. Name of person			ch <i>Bankruptcy Petitic</i> Signature (Official For	on Preparer's Notice, Declaration, rm 119).
	enalty of perjury, I declare y are true and correct.	that I have read the sun	nmary and schedules filed	with this declaratio	on and
	Valerie L Dozier		X		
	erie L Dozier nature of Debtor 1		Signature of D	ebtor 2	

Date

Date December 1, 2015

## Case 15-40857 Doc 1 Filed 12/01/15 Entered 12/01/15 10:14:05 Desc Main Document Page 36 of 56

Fill ir	n this inform	nation to identify you	r case:			
Debto	or 1	Valerie L Dozier				
Daha	0	First Name	Middle Name	Last Name		
Debto (Spous	or 2 se if, filing)	First Name	Middle Name	Last Name		
Unite	d States Bar	nkruptcy Court for the:	NORTHERN DISTRICT (	OF ILLINOIS		
Cana	numbar		-			
(if know	number				_	Check if this is an amended filing
	cial For		Affairs for Indivic	luals Filing for B	ankruptcy	12/15
inforn numb	nation. If meer (if known	ore space is needed, ). Answer every que	attach a separate sheet to	this form. On the top of ar	equally responsible for su y additional pages, write yo	
Part 1. V		current marital statu		Lived Before		
•	_	Janon mantai statt	<del></del>			
L	<ul><li>✓ Married</li><li>✓ Not married</li></ul>	riad				
_						
2. [	Juring the la	ist 3 years, nave you	lived anywhere other than	where you live now?		
	□ No					
	Yes. List	all of the places you	lived in the last 3 years. Do n	ot include where you live nov	V.	
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	dress:	Dates Debtor 2 lived there
	1301 N. Cle Chicago, II	eveland #10 L 60610	From-To: <b>2003-11/20/15</b>	☐ Same as Debtor		☐ Same as Debtor 1 From-To:
	■ No ■ Yes. Ma	es include Arizona, Ca	lifornia, Idaho, Louisiana, Ne hedule H: Your Codebtors (O	vada, New Mexico, Puerto R	nity property state or territo ico, Texas, Washington and '	
F	ill in the tota	I amount of income yo	nployment or from operatir ou received from all jobs and have income that you receiv	all businesses, including par		endar years?
[	□ No ■ Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until I for bankruptcy:	■ Wages, commissions, bonuses, tips	\$17,697.07	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

Case 15-40857 Doc 1 Filed 12/01/15 Entered 12/01/15 10:14:05 Desc Main

Document Page 37 of 56 Case number (if known) Debtor 1 Valerie L Dozier Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income Gross income Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For last calendar year: \$16,272.00 □ Wages, commissions, Wages, commissions, (January 1 to December 31, 2014) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business For the calendar year before that: \$26,270.00 ■ Wages, commissions, Wages, commissions, (January 1 to December 31, 2013) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** (before deductions and Describe below.. Describe below. (before deductions exclusions) and exclusions) List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? ☐ No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,225\* or more? □ No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$6,225\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts.

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

No. Go to line 7.

☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to

an attorney for this bankruptcy case.

Creditor's Name and Address **Dates of payment Total amount** Amount you Was this payment for ... paid still owe

Case 15-40857 Doc 1 Filed 12/01/15 Entered 12/01/15 10:14:05 Desc Main Document Page 38 of 56 Debtor 1 Valerie L Dozier Case number (if known) Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider Amount you **Insider's Name and Address Total amount** Reason for this payment Dates of payment paid still owe Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider.

Part 4: Identify Legal Actions, Repossessions, and Foreclosures

Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

Dates of payment

□ No■ Yes. Fill in the details.

**Insider's Name and Address** 

Yes. List all payments to an insider

Case title Case number	Nature of the case	Court or agency	Status of the case
Evergreen Terrace v. Valerie Dozier 2015 M1 719015	Civil	Circuit Court of cook county 50 West Washington Chicago, IL 60602	■ Pending □ On appeal □ Concluded
Presence St. Jos . Valerie Dozier 2015 M1 147643	Civil	Circuit Court of cook county 50 West Washington Chicago, IL 60602	☐ Pending ☐ On appeal ☐ Concluded

Total amount

paid

Amount you still owe

10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below.

No

Yes. Fill in the information below.

Creditor Name and Address

Describe the Property

Date

Value of the property

Explain what happened

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

■ No

☐ Yes. Fill in the details.

Creditor Name and Address

Describe the action the creditor took

Date action was taken

Amount

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

No

☐ Yes

Reason for this payment

Include creditor's name

Case 15-40857 Doc 1 Filed 12/01/15 Entered 12/01/15 10:14:05 Desc Main

Page 39 of 56 Document Debtor 1 Valerie L Dozier Case number (if known) Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? ☐ Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Value Dates you gave the gifts per person Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed **Charity's Name** Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No ☐ Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Value of property Date of your how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. ☐ No Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of or transfer was **Address** transferred payment **Email or website address** made Person Who Made the Payment, if Not You 5-15-15 \$117.00 US Bankruptcy Court of Illinois 219 S. Dearborn St. Fl. 6 through 7/10/15 Chicago, IL 60604 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16.

Nο

Yes. Fill in the details.

Person Who Was Paid Description and value of any property Amount of Date payment **Address** transferred or transfer was payment made

Doc 1 Filed 12/01/15 Entered 12/01/15 10:14:05 Desc Main Case 15-40857 Page 40 of 56
Case number (if known) Document

Debtor 1 Valerie L Dozier

t Ii	ransferred in the ordinary course of your bunclude both outright transfers and transfers ma	ears before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other d in the ordinary course of your business or financial affairs? the outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your and transfers that you have already listed on this statement.					
	☐ Yes. Fill in the details.						
	Person Who Received Transfer Address	Description and very property transfer		payme	ibe any property or ents received or debts n exchange	Date transfer was made	
	Person's relationship to you			•	Ü		
	Nithin 10 years before you filed for bankrup beneficiary? (These are often called asset-pro No		ny property to a	self-settle	ed trust or similar device	of which you are a	
-	<ul><li>Yes. Fill in the details.</li></ul>						
_	Name of trust	Description and v	alue of the prop	perty trans	sferred	Date Transfer was	
						made	
Part	8: List of Certain Financial Accounts, Ins	struments, Safe Deposi	t Boxes, and St	orage Uni	ts		
S	Nithin 1 year before you filed for bankruptc sold, moved, or transferred?	•				,	
	nclude checking, savings, money market, on ouses, pension funds, cooperatives, associations.				it; shares in banks, credi	t unions, brokerage	
	■ NO  Yes. Fill in the details.						
		Land Aultoite of	T (	4	Data	1 ( 1: - 1 - : - : -	
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account instrument	int or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer	
	Do you now have, or did you have within 1 yeash, or other valuables?	year before you filed for	r bankruptcy, ar	ny safe de	posit box or other depos	itory for securities,	
[	■ No □ Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?	
22. <b>F</b>	lave you stored property in a storage unit o	or place other than you	r home within 1	year befo	re you filed for bankrupto	су	
I [	■ No □ Yes. Fill in the details.						
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or I to it? Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?	
Part	9: Identify Property You Hold or Control	for Someone Else					
	Oo you hold or control any property that so or someone.	meone else owns? Incl	ude any propert	ty you bor	rowed from, are storing t	for, or hold in trust	
I [	■ No □ Yes. Fill in the details.						
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property	Value	
Part	10: Give Details About Environmental Info	,					
For th	e purpose of Part 10, the following definition	ons apply:					

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107 page 5 Case 15-40857 Doc 1 Filed 12/01/15 Entered 12/01/15 10:14:05 Desc Main Document Page 41 of 56

Case number (if known)

Debtor 1 Valerie L Dozier

> toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

	IIaza	dous material, polititant, contaminant,	or similar term.						
Rep	teport all notices, releases, and proceedings that you know about, regardless of when they occurred.								
24.	Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?								
	_	No Yes. Fill in the details.							
		e of site ress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)	nd	Environmental law, if you know it	Date of notice			
25.	Have	you notified any governmental unit of	any release of hazardous material?						
	_	No Yes. Fill in the details.							
		re of site ress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)	nd	Environmental law, if you know it	Date of notice			
26.	Have	you been a party in any judicial or adn	ninistrative proceeding under any en	viron	mental law? Include settlements	and orders.			
	■ No □ Yes. Fill in the details.								
		e Title e Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ture of the case	Status of the case			
Par	t 11:	Give Details About Your Business or	Connections to Any Business						
27.	Withi	n 4 years before you filed for bankrupt	cy, did you own a business or have a	any o	f the following connections to any	/ business?			
		☐ A sole proprietor or self-employed in	n a trade, profession, or other activit	y, eitl	her full-time or part-time				
		☐ A member of a limited liability comp	any (LLC) or limited liability partners	(LLC) or limited liability partnership (LLP)					
		☐ A partner in a partnership							
		☐ An officer, director, or managing ex	ecutive of a corporation						
		☐ An owner of at least 5% of the voting	g or equity securities of a corporatio	n					
		No. None of the above applies. Go to F	Part 12.						
		Yes. Check all that apply above and fill	in the details below for each busine	SS.					
		iness Name	Describe the nature of the business	3	Employer Identification number				
	Add (Num	ress ber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper		Do not include Social Security number or ITIN.				
28.	Withi	n 2 years before you filed for bankrupt	cv. did vou give a financial statemen	t to a	Dates business existed nvone about your business? Inclu	ude all financial			
		utions, creditors, or other parties.	-,, , g		· • • • • • • • • • • • • • • • • • • •				
	_	No Yes. Fill in the details below.							
	Nam Add (Num	-	Date Issued						

Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy page 6

Doc 1 Filed 12/01/15 Entered 12/01/15 10:14:05 Desc Main Case 15-40857 Page 42 of 56 Case number (if known) Document

Debtor 1 Valerie L Dozier

are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Valerie L Dozier	
Valerie L Dozier Signature of Debtor 1	Signature of Debtor 2
Date December 1, 2015	Date
Did you attach additional pages to □ No	Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
□ Yes	
Did you pay or agree to pay someo	ne who is not an attorney to help you fill out bankruptcy forms?
□ No	
☐ Yes Name of Person	Attach the Bankruntcy Petition Preparer's Notice Declaration and Signature (Official Form 110)

Case 15-40857 Doc 1 Filed 12/01/15 Entered 12/01/15 10:14:05 Desc Main Page 43 of 56
Case number (if known) Document

Debtor 1 Valerie L Dozier

Case 15-40857 Doc 1 Filed 12/01/15 Entered 12/01/15 10:14:05 Desc Main Document Page 44 of 56 Case number (if known)

#### **DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR**

declare under pena	alty of perjury that	I have read the ar	nswers containe	ed in the foregoing	statement of financia	l affairs and any a	ittachments thereto a	and
that they are true an	nd correct.							
•								

Date December 1, 2015

Signature /s/ Valerie L Dozier

Valerie L Dozier

Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

#### Case 15-40857 Doc 1 Filed 12/01/15 Entered 12/01/15 10:14:05 Desc Main Document Page 45 of 56

Fill in this information to identify your case:						
Debtor 1	Valerie L Dozier					
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Ban	kruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS			
Case number						
(if known)					☐ Ch	eck if this is an
					am	ended filing
-						3

#### Official Form 108

### Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	<u></u>
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property securing debt:	☐ Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	<u></u>
Description of	☐ Retain the property and enter into a Reaffirmation Agreement.	Yes
property securing debt:	☐ Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	<b></b>
Description of	☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property securing debt:	☐ Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

## Case 15-40857 Doc 1 Filed 12/01/15 Entered 12/01/15 10:14:05 Desc Main Document Page 46 of 56

B8 (	Form 8) (12/08)			Page 2
ı	name:		☐ Retain the property and redeem it.	☐ Yes
			☐ Retain the property and enter into a	
	Description of		Reaffirmation Agreement.	
	property		☐ Retain the property and [explain]:	
:	securing debt:			
Pa	rt 2: List Your U	nexpired Personal Property Leases		
in t	he information bel	ow. Do not list real estate leases. Ur	in Schedule G: Executory Contracts and Unexperied leases are leases that are still in effective the trustee does not assume it. 11 U.S.C. § 365	t; the lease period has not yet ended.
De	scribe your unexp	ired personal property leases		Will the lease be assumed?
Les	ssor's name:	Evergreen Terrace Apartments		□ No
				■ Yes
	escription of leased operty:	1 year lease renews 8/2015		
Pa	rt 3: Sign Below			
		ury, I declare that I have indicated met to an unexpired lease.	y intention about any property of my estate tha	at secures a debt and any personal
X	/s/ Valerie L Do	ozier	X	
	Valerie L Dozie	er	Signature of Debtor 2	
	Signature of Debt	tor 1		
	Date <b>Dece</b>	nber 1, 2015	Date	

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

## The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 15-40857 Doc 1 Filed 12/01/15 Entered 12/01/15 10:14:05 Desc Main Document Page 51 of 56

B2030 (Form 2030) (12/15)

#### **United States Bankruptcy Court** Northern District of Illinois

In re	e Valerie L Dozier		Case No	O.	
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPENS	SATION OF ATTO	RNEY FOR I	DEBTOR(S)	
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b) compensation paid to me within one year before the filing of be rendered on behalf of the debtor(s) in contemplation of	of the petition in bankruptcy	, or agreed to be pa	aid to me, for service	
	For legal services, I have agreed to accept		\$	117.00	
	Prior to the filing of this statement I have received		\$	117.00	
	Balance Due		\$	0.00	
2.	\$_335.00 of the filing fee has been paid.				
3.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
4.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
5.	■ I have not agreed to share the above-disclosed compen	sation with any other persor	unless they are mo	embers and associate	es of my law firm.
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the names				my law firm. A
6.	In return for the above-disclosed fee, I have agreed to rend	er legal service for all aspec	ets of the bankruptc	y case, including:	
	<ul> <li>a. Analysis of the debtor's financial situation, and rendering</li> <li>b. Preparation and filing of any petition, schedules, statement</li> <li>c. Representation of the debtor at the meeting of creditors</li> <li>d. [Other provisions as needed]</li> <li>Negotiations with secured creditors to recreaffirmation agreements and applications</li> <li>522(f)(2)(A) for avoidance of liens on house</li> </ul>	nent of affairs and plan which and confirmation hearing, a duce to market value; ex as needed; preparatio	h may be required; and any adjourned l cemption plannia	nearings thereof;	nd filing of
	Outside counsel may be employed under t	firm supervision, and pa	aid by our firm.		
7.	By agreement with the debtor(s), the above-disclosed fee d Representation of the debtors in any discl			ary proceeding.	
		CERTIFICATION			
	I certify that the foregoing is a complete statement of any a bankruptcy proceeding.	greement or arrangement fo	r payment to me for	r representation of the	he debtor(s) in
	December 1, 2015	/s/ Alexander Ty			
1	Date	Alexander Tynko Signature of Attorn			
		Zalutsky & Pinsk			
		111 W. Washing	ton		
		Suite 1550 Chicago, IL 6060	)2		
		312-782-9792 F	ax: 312-782-0483	3	
		admin@ZAPLaw	Firm.com		

Name of law firm

Case 15-40857 Doc 1 Filed 12/01/15 Entered 12/01/15 10:14:05 Desc Main Document Page 52 of 56

## PRE-PETITION CHAPTER 7 RETAINER AGREEMENT

	그들은 그리고 한글로그릇하고 얼마나면 되었다. 전에 되었다고 하면 하는데 하는데 보고 하는데 보고 있다. 그는 그는 그는 그는 그는 그는 그는 그를 모든데 되었다. 그는
se size the process of the process o	retain the law firm of Zalutsky & Pinski, Ltd., for the limited purpose of providing legal roice related to an including; providing an evaluation of the undersigned's financial uation and an explanation of available options, including Chapter 13. After which liutsky & Pinski, Ltd., agreed to prepare and file Debtor(s)' petition and/or schedules with a Clerk of the Bankruptcy Court. In addition to the legal services provided, Zalutsky & nski, Ltd., agrees to obtain a credit report on behalf of the Debtor(s) as well as assist in a procurement of mandatory credit counseling. Zalutsky & Pinski, Ltd.'s representation completed and any and all agreements, including but not limited to this one are miniated upon the filing of Debtor(s)' Bankruptcy petition and/or schedules.  Debtor(s) agrees to pay a retainer in the amount of \$
\ <u>}</u>	eptor ZALUTSKY & PINSKI, LTD.
_	H/H/IT
<u>)</u>	pint Debtor Date
	4-17-15
Ī	eate

## **United States Bankruptcy Court Northern District of Illinois**

		1 (of their Bistrict of Immors		
In re	Valerie L Dozier		Case No.	
		Debtor(s)	Chapter 7	
	VE	CRIFICATION OF CREDITOR N	MATRIX	
		Number o	f Creditors:	28
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of credi	itors is true and correct to t	he best of my
Date:	December 1, 2015	/s/ Valerie L Dozier Valerie L Dozier Signature of Debtor		

Metropolitan Advanced Radiolog C/O Atg Credit 1043 W. Grandville Chicago, IL 60660

Americash 7454 South Cicero Bedford Park, IL 60629

Att Midwest IC Systems, Inc 444 Highway 96 East, Po Box 64378 St Paul, MN 55164

Att Midwest IC Systems, Inc 444 Highway 96 East, Po Box 64378 St Paul, MN 55164

Chicago Imaging Associates Merchants Cr 223 W. Jackson Blvd., Suite 400 Chicago, IL 60606

Chicago Northside Mri Keynote Consulting 220 West Campus Drive, Suite 102 Arlington Heights, IL 60004

Emergency Physician Mgmt Srvs Cda/pontiac Po Box 213 Streator, IL 61364

Emergency Physician Mgmt Srvs Cda/pontiac Po Box 213 Streator, IL 61364

Evergreen Terrace Apartments 425 W. Evergreen Chicago, IL 60610

Evergreen Terrace Apartments 425 W. Evergreen Chicago, IL 60610

Fingerhut Freshstart Jefferson Capital Systems, LLC 16 Mcleland Rd Saint Cloud, MN 56303

Gately James 8233 W 185TH STREET Tinley Park, IL 60487

Gately, James 4550 W. 103rd St. Oak Lawn, IL 60453

Gold Coast Animal Hospital Diversified Svs Group 1824 W Grand Ave - Suite 200 Chicago, IL 60622

Gold Coast Animal Hospital Diversified Svs Group 1824 W Grand Ave - Suite 200 Chicago, IL 60622

HUSBY MARVIN L III 852 W ARMITAGE Chicago, IL 60614

Internal Revenue Service Dept of the Treasury P.O. Box 7346 Philadelphia, PA 19101

James Gately 8233 W 185th St Tinley Park, IL 60487

Med1 02 Lincoln Park Anesthesia Med Business Bureau Po Box 1219 Park Ridge, IL 60068

Metropolitan Advanced Radiolog C/O Atg Credit 1043 W. Grandville Chicago, IL 60660 Peoples Gas 200 E Randolph St 20th Floor Chicago, IL 60601

Presence Medical Group Pellettieri 991 Oak Creek Dr Lombard, IL 60148

Presence Medical Group Pellettieri 991 Oak Creek Dr Lombard, IL 60148

Presence Saint Joseph Hospital 8231 185th St Ste 100 8231 185th St Ste 100 Tinley Park, IL 60487

Rcn IC Systems, Inc 444 Highway 96 East, Po Box 64378 St Paul, MN 55164

Rcn IC Systems, Inc 444 Highway 96 East, Po Box 64378 St Paul, MN 55164

Saint Joseph Hospital C/O Grant & Weber 26575 W. Agoura Rd. Calabasas, CA 91302

Saint Joseph Hospital Grant & Weber 26575 W. Agoura Rd. Calabasas, CA 91302